



## ADDRESS CHANGE FORM

**Please remember that it is the responsibility of the applicant to report all address changes. Failure to do so will result in your application being withdrawn from the waiting list. This means that you will have to reapply for housing assistance.**

Today's Date: \_\_\_\_\_

Name: \_\_\_\_\_

Social Security #: \_\_\_\_\_

### OLD ADDRESS:

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

### NEW ADDRESS:

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

### OTHER CHANGES:

☐ I now live/work in Howard County      ☐ I am now 62 years old      ☐ I am now disabled

☐ I am pregnant/gave birth      ☐ I am newly married      ☐ I am newly divorced

### PLEASE EXPLAIN:

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*Howard County grants a preference to persons who live, or who have one or more primary wage earners who work in the county. If you do not live or work in the county, we suggest that you investigate affordable housing opportunities in the jurisdiction in which you reside.*